

County: Oconto  
WOODLAND VILLAGE  
430 MANOR DRIVE

Facility ID: 9650

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SURING 54174 Phone:(920) 842-2191  
Operated from 1/1 To 12/31 Days of Operation: 365  
Operate in Conjunction with Hospital? No  
Number of Beds Set Up and Staffed (12/31/02): 60  
Total Licensed Bed Capacity (12/31/02): 60  
Number of Residents on 12/31/02: 58

Ownership:  
Highest Level License: Skilled  
Operate in Conjunction with CBRF? No  
Title 18 (Medicare) Certified? Yes  
Title 19 (Medicaid) Certified? Yes  
Average Daily Census: 59

Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/02)				Length of Stay (12/31/02)		%
Home Health Care	Yes	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		17.2
Supp. Home Care-Personal Care	No	-----		-----		1 - 4 Years		67.2
Supp. Home Care-Household Services	No	Developmental Disabilities	1.7	Under 65	3.4	More Than 4 Years		15.5
Day Services	Yes	Mental Illness (Org./Psy)	39.7	65 - 74	3.4			-----
Respite Care	Yes	Mental Illness (Other)	5.2	75 - 84	36.2			100.0
Adult Day Care	Yes	Alcohol & Other Drug Abuse	0.0	85 - 94	46.6	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	10.3	Full-Time Equivalent		
Congregate Meals	No	Cancer	0.0		-----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	0.0		100.0	(12/31/02)		
Other Meals	No	Cardiovascular	15.5	65 & Over	96.6	-----		
Transportation	Yes	Cerebrovascular	13.8		-----	RNs		8.1
Referral Service	No	Diabetes	3.4	Sex	%	LPNs		9.2
Other Services	No	Respiratory	3.4	-----		Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	17.2	Male	34.5	Aides, & Orderlies		
Mentally Ill	No		-----	Female	65.5	50.4		
Provide Day Programming for			100.0		-----			
Developmentally Disabled	No				100.0			

Method of Reimbursement

Medicare (Title 18)			Medicaid (Title 19)			Other			Private Pay			Family Care			Managed Care			Total Resi- dents	% Of All	
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%			Per Diem (\$)
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Skilled Care	2	100.0	289	34	81.0	109	0	0.0	0	14	100.0	128	0	0.0	0	0	0.0	0	50	86.2
Intermediate	---	---	---	8	19.0	91	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	8	13.8
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	2	100.0		42	100.0		0	0.0		14	100.0		0	0.0		0	0.0		58	100.0

Admissions, Discharges, and Deaths During Reporting Period						Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/02				
						-----				
Percent Admissions from:						Activities of	%	% Needing Assistance of	% Totally	Total
						Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Number of Residents
Private Home/No Home Health	5.9					Bathing	0.0	72.4	27.6	58
Private Home/With Home Health	5.9					Dressing	12.1	69.0	19.0	58
Other Nursing Homes	47.1					Transferring	25.9	56.9	17.2	58
Acute Care Hospitals	35.3					Toilet Use	25.9	51.7	22.4	58
Psych. Hosp.-MR/DD Facilities	0.0					Eating	51.7	37.9	10.3	58
Rehabilitation Hospitals	0.0					*****				
Other Locations	5.9					Continence		%	Special Treatments	%
Total Number of Admissions	17					Indwelling Or External Catheter		6.9	Receiving Respiratory Care	5.2
Percent Discharges To:						Occ/Freq. Incontinent of Bladder		46.6	Receiving Tracheostomy Care	0.0
Private Home/No Home Health	5.6					Occ/Freq. Incontinent of Bowel		13.8	Receiving Suctioning	0.0
Private Home/With Home Health	11.1					Mobility			Receiving Ostomy Care	10.3
Other Nursing Homes	0.0					Physically Restrained		5.2	Receiving Tube Feeding	6.9
Acute Care Hospitals	5.6								Receiving Mechanically Altered Diets	37.9
Psych. Hosp.-MR/DD Facilities	0.0					*****				
Rehabilitation Hospitals	0.0					Skin Care			Other Resident Characteristics	
Other Locations	0.0					With Pressure Sores		5.2	Have Advance Directives	89.7
Deaths	77.8					With Rashes		8.6	Medications	
Total Number of Discharges									Receiving Psychoactive Drugs	46.6
(Including Deaths)	18									

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Selected Statistics: This Facility Compared to All Similar Rural Area Facilities & Compared to All Facilities

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		This Facility	Ownership: Proprietary	Bed Size: 50-99	Licensure: Skilled	All Facilities			
		%	Peer Group Ratio	Peer Group % Ratio	Peer Group % Ratio	% Ratio	%	Ratio	
Occupancy Rate: Average Daily Census/Licensed Beds		98.3	80.0	1.23	83.5	1.18	83.3	1.18	85.1
Current Residents from In-County		82.8	73.3	1.13	72.9	1.14	75.8	1.09	76.6
Admissions from In-County, Still Residing		58.8	19.2	3.07	22.2	2.65	22.0	2.67	20.3
Admissions/Average Daily Census		28.8	136.0	0.21	110.2	0.26	118.1	0.24	133.4
Discharges/Average Daily Census		30.5	138.5	0.22	112.5	0.27	120.6	0.25	135.3
Discharges To Private Residence/Average Daily Census		5.1	59.1	0.09	44.5	0.11	49.9	0.10	56.6
Residents Receiving Skilled Care		86.2	93.4	0.92	93.5	0.92	93.5	0.92	86.3
Residents Aged 65 and Older		96.6	95.9	1.01	93.5	1.03	93.8	1.03	87.7
Title 19 (Medicaid) Funded Residents		72.4	73.2	0.99	67.1	1.08	70.5	1.03	67.5
Private Pay Funded Residents		24.1	16.8	1.44	21.5	1.12	19.3	1.25	21.0
Developmentally Disabled Residents		1.7	0.9	1.99	0.7	2.31	0.7	2.39	7.1
Mentally Ill Residents		44.8	33.7	1.33	39.0	1.15	37.7	1.19	33.3
General Medical Service Residents		17.2	19.3	0.90	17.6	0.98	18.1	0.95	20.5
Impaired ADL (Mean)		48.3	46.1	1.05	46.9	1.03	47.5	1.02	49.3
Psychological Problems		46.6	51.2	0.91	54.6	0.85	52.9	0.88	54.0
Nursing Care Required (Mean)		9.3	7.2	1.29	6.8	1.37	6.8	1.37	7.2